Emergency Services District (ESD) Reporting Form Jan. 1, 2021

Information received from this form will be transmitted to the Texas Division of Emergency Management in satisfaction of reporting requirements under Chapter 775 of the Health and Safety Code. This form is for the report required for Jan. 1, 2021.

Please familiarize yourself with the form before you begin submitting answers, because there is no mechanism to save the form and return later.

ESD Name (i.e., Buffa	alo County ESD No.	.99) *	
Montgomery Coun	ty Emergency Ser	vices District No. 10	
County or Counties i	n Which ESD is Loc	cated *	
Montgomery			
ESD Business Addre	ss *		
Magnolia Fire Stati	on 181		
Street Address			
18215 Buddy Riley	Blvd.	Account and a second contract	
Street Address Line 2		Tall Management and Control of the C	
Magnolia	Texas		
City	State / Province		
77353	United States	V	
Postal / Zip Code	Country		

ESD email *

info@magnoliaesd.org

ESD phone *
281 - 356-3288 Area Code Phone Number
www.magnoliaesd.org
Type of ESD * Fire Emergency Medical Service Both
Annual ESD Budget *
\$14,487,580
Tax rate (most recently adopted; i.e., \$0.10/\$100) * \$0.10/\$100
Population of ESD
Area (sq. miles) of ESD
Does your ESD collect a sales tax? ● Yes ● No
If your ESD collects a sales tax, what is the rate of the sales tax? (i.e. $1/2$ percent) 0.01

Name of Pe	rson Completing this Form *
Nicole	Pierce
First Name	Last Name
E-mail *	
pierce(@coveler.com
Phone Num	ber *
713	984-8222
Area Code	Phone Number
Name of ES	D President (Commissioner No. 1) *
Bob	Buschardt
First Name	Last Name
E-mail *	
bob.buschar	dt@magnoliaesd.org_
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Term Expire	es (example: 12/31/20) *
12/31/202	
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Scot	Wall
First Name	Last Name
E-mail *	
scot.wall@)magnoliaesd.org
Term Expires	s (example: 12/31/19) *
12/31/2021	
	Latera, southern that the American Control of the C
Name of ESD	Secretary (Commissioner No. 3) *
Johnnie	
	Bryant
First Name	Last Name
E-mail *	
iohnnie bryant	@magnoliaesd.org
Term Expires	(example: 12/31/19) *
12/31/2020	
12/3 1/2020	
Name of ESD	Treasurer (Commissioner No. 4) *
Tate	Robinson
First Name	Last Name
E-mail *	
tate robinson@	Dmagnoliaesd.org
tate.iobilisone	ginagholiaesu.org
	од на придости до протовно на на приводно на населения на
	(example: 12/31/19) *

Name of ES	D Commissioner (Commissioner No. 5)
Tommy	Gage
First Name	Last Name
E-mail *	
tommy.gag	ge@magnoliaesd.org
Term Expire	es (example: 12/31/19) *
12/31/2020	
Name of ES	D's legal counsel *
John	Peeler
First Name	Last Name
Address	
Coveler &	Peeler, P.C.
Street Address	
820 Gessn Street Address L	er, Suite 1710
Houston	Texas
City	State / Province
77024	United States
Postal / Zip Code	e Country
Phone Num	ber
713 -	984-8222
Area Code	Phone Number

E	-m	а	i	*

peeler@coveler.com

Name of ES	SD's general manag
Rhonda	Reinholz
First Name	Last Name
E-mail	
rreinholz@	magnoliafire.org
Name of fire	e chief or EMS CEC
Gary	Vincent

E-mail

First Name

garyvincent@magnoliafire.org

Last Name

Names of Other Consultant

Carol Morrison
First Name Last Name

Service provided (i.e. audit)

Bookkeeping

E-mail

	her Consultant
Jon	Watson
irst Name	Last Name
≣-mail	
	ookswatsonco.com
	ookswatsonco.com

Submit Form

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